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Dkt. No. 82259/156

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicant: Khosrow Golshan

Title: METHOD AND APPARATUS FOR
OPTICAL PROCESSING

Appl. No.: To Be Determined

Filing Date: To Be Determined

Examiner: To Be Determined

Art Unit: To Be Determined

CERTIFICATE OF EXPRESS MAILING
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.

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Shirley Miksa
(Printed Name)

Shirley Miksa
(Signature)



Assistant Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Khosrow Golshan

Enclosed are:

- Specification, Claim(s), and Abstract (20 pages).
- Informal drawings (7 sheets, Figures 1-8).
- Declaration and Power of Attorney (4 pages).
- Assignment of the invention to Conexant Systems, Inc..
- Assignment Recordation Cover Sheet.
- Check in the amount of \$40.00 for Assignment recordation.
- Small Entity statement.
- Information Disclosure Statement.
- Form PTO-1449 with copies of 0 listed reference(s).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$690.00	\$690.00
Total Claims:	46	20	26	x \$18.00	\$468.00
Independents:	5	3	2	x \$78.00	\$156.00
If any Multiple Dependent Claim(s) present:				+ \$260.00	\$0.00
				SUBTOTAL:	\$1314.00
[]				Small Entity Fees Apply (subtract 1/2 of above):	\$0.00
				TOTAL FILING FEE:	\$1314.00

[X] A check in the amount of \$1314.00 to cover the filing fee is enclosed.

[] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

[X] The Assistant Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Assistant Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date August 02, 2000

By Alistair K. Chan

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